

Pat Book 200

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)**

SERIAL NO. **10/516476**

FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS						
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
1	/						51						
2		/						52					
3								53					
4		/						54					
5	/							55					
6		/						56					
7		/						57					
8		/						58					
9	/							59					
10		/						60					
11	/							61					
12	/							62					
13	/							63					
14		/						64					
15		/						65					
16		/						66					
17		/						67					
18		/						68					
19		/						69					
20		/						70					
21		/						71					
22		/						72					
23		/						73					
24	/							74					
25		/						75					
26		/						76					
27		/						77					
28		/						78					
29		/						79					
30		/						80					
31		/						81					
32		/						82					
33		/						83					
34		/						84					
35		/						85					
36		/						86					
37		/						87					
38		/						88					
39		/						89					
40		/						90					
41		/						91					
42		/						92					
43		/						93					
44		/						94					
45		/						95					
46		/						96					
47		/						97					
48		/						98					
49		/						99					
50		/						100					
TOTAL IND.	26							TOTAL IND.					
TOTAL DEP.		35						TOTAL DEP.					
TOTAL CLAIMS	35							TOTAL CLAIMS					